| POSITION | INITIALS | ID No. | DATE |
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| FEE DETERMINATION | *fl* | | 05/02/01 |
| O.I.P.E. CLASSIFIER | *m* | *m* | 5/15 |
| FORMALITY REVIEW | S.H | 1085 | 6/22/01 |
| RESPONSE FORMALITY REVIEW | *Zm* | 927 | 10-18-01 |

## INDEX OF CLAIMS

✔  ................................. Rejected
=  ................................. Allowed
—  (Through numeral)... Canceled
÷  ................................. Restricted

N  ................................. Non-elected
I  ................................. Interference
A  ................................. Appeal
O  ................................. Objected

| Claim Final | Original | Date |
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| Claim Final | Original | Date |
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| Claim Final | Original | Date |
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